

Property owner name: \_\_\_\_\_

Phone number: \_\_\_\_\_

Date application completed: \_\_\_\_\_

Address of property to be rehabilitated:  
\_\_\_\_\_  
\_\_\_\_\_

\* Income: All members of the household (all persons living all or part of the next 12 months in a unit or dwelling) must be included when determining income. Income may be verified through certification and backup documentation such as paystubs.

Characteristics of person(s) living in the dwelling to be assisted with HPG funds for all or part of the next 12 months:

Name	Age	Wht	Blk	His	Ai/An	Asn/PI
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

(Ai/An = American Indian/Alaskan Native; Asn/PI = Asian/Pacific Islander)

***(NOTE: The racial/ethnic information solicited on this application is requested by the State in order to assure the Federal Government, acting through the US Department of Agriculture, Rural Development (RD) that the Federal laws prohibiting discrimination against applicants on the basis of race, color, national origin, religion, sex, familial status, age and handicap are being complied with. You are not required to furnish this information but are encouraged to do so. This information will not be used in evaluating your application or to discrimination against you in any way. However, if you choose not to furnish it, the application Point of Contact is required to note the race/national origin and sex of the individual applicants on the basis of visual observation or surname.)***

Number of bedrooms in proposed unit: \_\_\_\_\_

Year Structure Built: \_\_\_\_\_

***(Note: If built prior to 1978, must consider potential lead paint hazards)***

Total Estimated Rehabilitation Costs: \$\_\_\_\_\_

Total RI HPG Assistance Requested: \$\_\_\_\_\_

***(Note: May not exceed \$10,000)***

Will relocation expenses be necessary? Yes                      No

(Circle One)

If Yes, please detail: \_\_\_\_\_

Amount Needed: \$\_\_\_\_\_

Describe requested rehabilitation activities to be completed:  
(Attach work write-up to Prerehabilitation Form. Write-up should be presented in such a way as to assure that Contractors can bid on the project consistently)  
(Take directly from list of eligible activities, as applicable)

---

---

---

---

Please note the following requirements:

- \* *Rehabilitation must be for eligible HPG activities;*
- \* *The applicant must have owned the dwelling to be rehabilitated at least 1 year prior to assistance;*
- \* *The applicant must be the intended occupant subsequent to assistance;*
- \* *The applicant's income must not exceed the 'lower limits' according to size of household as described by HUD; and*
- \* *The units to be rehabilitated must be in an eligible rural area.*

Environmental Review:  
(Circle all which were applicable to this project)

Flood Zone	Yes	No
Wetland	Yes	No
Historic Property	Yes	No

We have considered this dwelling under USDA RD's environmental and historic preservation requirements for a HPG (Section 1944.672 and 1944.673 of this subpart) and an environmental assessment was not required. The review was completed in accordance with the process to identify property requiring a USDA RD environmental assessment approved with the State's Statement of Activities.

Attach: Certification relative to FmHA Thermal Standards. All units must be brought up to these standards or already be in compliance with such.

Attach: Required Backup Documentation relative to income and eligibility.

NOTE: Funds will be awarded on a first-come, first-served basis. The State does not guarantee monies will be available to fund this application. Any application which is submitted to MA/CD incomplete/deemed ineligible will not have funds committed to it and be returned to the application Point of Contact.

If multiple applications are received concurrently, and funds are insufficient to fund all applications, preference will be given to application(s) which eliminate overcrowding or which provide the greatest benefit to very low-income persons in accordance with the State's program design.

---

Applicant's (Homeowner) Signature                      Date

---

Preparer's (Point of Contact) Signature                      Date

IN ACCORDANCE WITH FEDERAL LAW AND U.S. DEPARTMENT OF AGRICULTURE POLICY, THIS INSTITUTION IS PROHIBITED FROM DISCRIMINATING ON THE BASIS OF RACE, COLOR, NATIONAL ORIGIN, SEX, AGE, OR DISABILITY. (NOT ALL PROHIBITED BASES APPLY TO ALL PROGRAMS).

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whiten Building, 1400 Independence Avenue, SW, Washington, DC, 20250-9410 or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.

***STATE of RHODE ISLAND***

***FmHA Thermal Standards Certification, MA/CD 533-00-02***

I hereby certify that Thermal Performance requirements (FmHA's thermal standards for existing structures) will be met in the following home assisted prior to the completion of the HPG funded work.

Address: \_\_\_\_\_

Homeowner(s) Name: \_\_\_\_\_

Agency conducting energy inspection: \_\_\_\_\_

Source of funds  
for energy improvements: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

(Agency which will fund improvements if necessary)

## **MEMORANDUM**

**TO: Local Points of Contact**

**FR: Michael Tondra, Program Specialist**

**RE: USDA, Housing Preservation Grants Program**

**DA: October 20, 2000**

Please be advised that the State of Rhode Island has been awarded \$40,000 under the USDA, Housing Preservation Grants program to provide assistance to Very Low & Low-income (Low/Moderate in CDBG terms) homeowners for the rehabilitation of their homes to eliminate health and safety hazards. Income-eligible homeowners in rural communities, as defined by USDA, are eligible to apply directly to the State through the area Point of Contact's office.

Funds are distributed on a first-come, first-served basis.  
**Applications will be accepted beginning November 1, 2000.**

Application materials are attached. Please complete the required forms (Prerehabilitation, Thermal Certification) and submit them along with any backup documentation (income backup, ownership backup, rehabilitation work needed) to me at this office. Applications cannot be accepted via fax. Since there are such limited resources available, I suggest you submit those applicants which would be most competitive (lowest income, largest family size).

As required by USDA, structures which receive HPG assistance must meet USDA, Thermal standards at completion of HPG project. As you are aware, communities/agencies were allowed previously to certify that the units would be brought up to thermal standards within one year of completion; this flexibility is no longer permitted. Appropriate certification to this effect is included in the attached packet and should be completed and sent in along with any application submitted. I would suggest you review potential applicants and have those individuals who best meet this program's requirements, apply for these funds. Those unable to be assisted by these resources, could be provided CDBG/RIH monies.

Also attached, as requested by USDA, are USDA Equal Opportunity/Fair Housing Posters and the Non-Discrimination Statement. These should be posted wherever applications are accepted. Pamphlets explaining the program are also being forwarded to you for your distribution to interested parties.

Maximum HPG grant award per recipient is \$10,000; although matching funds are encouraged, there is no match requirement. For the first six months of the program (11/1/00-5/1/2001), funds will be available to homeowners in rural communities, as defined by USDA/RD, with populations of 10,000 or less. These include:

- Charlestown, EG CDC
- Exeter, EG CDC
- Foster, WRIHRP
- Glocester, WRIHRP
- Hopkinton, EG CDC
- Jamestown, CCHC
- Little Compton, CCHC
- New Shoreham, Town
- Richmond, EG CDC
- Scituate, WRIHRP
- West Greenwich, EG CDC

If you have any questions please do not hesitate to the Office of Municipal Affairs at (401) 222-4411.

Procedures:

- 1) Applicant contacts application Point of Contact (ie. agency/municipality);
- 2a) Determine applicant eligibility and conduct an initial inspection and work write-up;
- 2b) Fill out Required Forms (Prerehabilitation/Certification) and submit to MA/CD;
- 3) MA/CD commits funds, if available;
- 4) Appropriate contract(s) (State, Homeowner and Point of Contact) are drafted and signed by all parties (note: assistance under the HPG program will be a grant (5-year lien));
- 5) An environmental review of the project is conducted:  
Flood Zone, Wetland?  
Historic Property?
- 6) A contractor is chosen through proper procurement procedures (ie. document reasonable costs);  
(24 CFR Part 85.36)
- 7) Rehabilitation on the property is completed;
- 8) Post rehabilitation site review conducted by disinterested third-party.
- 8a) Completion form completed and submitted to MA/CP along with Request For Payment.
- 8b) Payment is processed



